

MAY 04 2005

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PTO/SB/21 (08-00)

TAL

FORM

(to be used for all correspondence after initial filing)

Application Number	10/822,414
Filing Date	04/12/2004
First Named Inventor	DONG WOO GIM
Group Art Unit	2872
Examiner Name	
Attorney Docket Number	1802.04
Total Number of Pages in This Submission	5

ENCLOSURES (check all that apply)

- | | | |
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| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
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| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	John K. Park Registration No. 37,904
Signature	<u>[Signature]</u>
Date	05/04/2005

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/822,414
	Filing Date	04/12/2004
	First Named Inventor	DONG WOO GIM
	Art Unit	2872
	Examiner Name	
	Attorney Docket Number	1802.04

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: **29338**

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: **29338**

OR


<input type="checkbox"/> Firm or Individual Name			
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Country			
Telephone	Fax		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	DONG WOO GIM		
Date	4/30/05	Telephone	714-525-7720

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1/4 forms are submitted.

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	First Named Inventor	DONG WOO GIM
	Art Unit	2872
	Examiner Name	
	Attorney Docket Number	1802.04

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☒ The address associated with
Customer Number:
29338

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
SIGNATURE of Applicant or Assignee of Record

Signature	<i>Seo Cheong Seo</i>		
Name	CHEONG SOO SEO		
Date	4/30/05	Telephone	714-525-7720

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/822,414
Filing Date	04/12/2004
First Named Inventor	DONG WOO GIM
Art Unit	2872
Examiner Name	
Attorney Docket Number	1802.04

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: **29338**

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

29338

OR

☐ Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

GYOUNG IL CHO

Date

4/30/05

Telephone

714-525-7720

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of **3/4** forms are submitted.

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PTO/SB/82 (09-04)

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	Filing Date	04/12/2004
	First Named Inventor	DONG WOO GIM
	Art Unit	2872
	Examiner Name	
	Attorney Docket Number	1802.04

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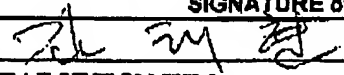
<input type="checkbox"/> Firm or Individual Name			
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City	State	Zip	
Country			
Telephone	Fax		

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	TAE HYEON KIM		
Date	4/30/05	Telephone	714-525-7720

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, one below.

☒ *Total of 4/4 forms are submitted.

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